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FEC FORM 3

REPORT OF RECEIPTS

For An Authorized Committee

SECRETARY OF THE SENATE

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FEC FORM 3

(Revised 02/2003)

_		TO THE FLORIDA GOTTINICOC				Office Use Only		
1.	NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		xample: If typing ver the lines.	ng, type	12FE4M		
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2.	FEC IDENTIFICATION N	UMBER ▼ _	CITY A		·	STATE A	ZIP CODE	A
_	C0.03.4.7.3	1 O 3.	IS THIS REPORT	NEV (N)	OR	AMEN (A)		DISTRICT
4.	TYPE OF REPORT (Ch. (a) Quarterly Reports: April 15 Quarterly F July 15 Quarterly F October 15 Quarter January 31 Year-En	Report (Q1) Report (Q2) riy Report (Q3) and Report (YE) (c)	Election on	Primary (12F) Convention (M*M T-Election Report General (30G)	(12C)	General (Special (** Y Y Y Y Y Runoff (3)	in the State of	off (12R)
5. Covering Period 10 07 2014 through 12 31 2014 I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Mindy M. Hanneman, Assistant Treasurer								
Signature of Treasurer Mindy M. Hanneman Date DI 28 2015 NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.								
	Office	ous, or incomplete infor	mation may s	subject the pers	son signing t	nis Report to th	ne penalties of 52 U.S	i.C. §30109.